## FILED May 13, 2004 8:00 am Secretary of State 04-23-2004 90244 031 \*\*\*150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

4/2

DOCUMENT # P03000116231  1. Entity Name CONSTRUCTION AND JANITORIAL CLEANING CORP				· · · · · · · · · · · · · · · · · · ·	. 6	66421369	
Principal Place of Business 18906 NE 1ST COURT APT 6 MIAMI, FL 33179	Mailing Address 18906 NE 1ST_COUR APT 6 MIAMI, FL 33179	menneral				11 11 11 11 11 11 11 11 11 11 11 11 11	
2. Principal Place of Business	3. Mailing Address					N KOOLURIO RIID IARA IU	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			04202004	Chg-P	CR2E034 (10/0	3)
City & State	City & State	\$ State		4 Fi Alumber	084	620	Applied For Not Applicable
Zip Country	Zip	Country		5. Certificate of	Status Desired	□ \$8.75 Fee Requ	Additional fired
6. Name and Address of Current F	legistered Agent	Name		7. Name and A	ddress of New F	Registered Agent	
ALEXANDER, BEULALEE 18906 NE 1ST COURT		Street A	ddress (P	O. Box Number	is Not Acceptabl	s)	<del></del>
APT 6 MIAMI, FL 33179		<del></del>	·			<del></del>	
		City		·	<del></del>	FL Zp C	ode
3. The above named entity submits this statement for the obligations of registered agent.	the purpose of changing it.	s registered office o	r registere	ed agent, or both	in the State of FI	orida. I am familiar w	ith, and accept
SIGNATURE <sup>1+</sup>	ergs.						Ì
Signature, typed or printed name of registered agent as		TE: Registered Agent signal	ura required y	often reinstating)		DATE	
FILE NOWILL FEE (\$ \$150.00 After May 1, 2004 Fee will be \$550.0	9. Election Campa Trust Fund Cor	aign Financing	\$5.0 Adde	00 May Be od to Fees		Ayrat v	
10. OFFICERS AND C	DIRECTORS  Clifford Didelo	11. · · · · · · · · · · · · · · · · · ·	·	ADDITIONS/C	HANGES TO OF	ICERS AND DIRECT	
ALEXANDER, BEAULALEE STREET ADDRESS 18906 NE 1ST COURT, APT 6	· · · · · · · · · · · · · · · · · · ·	NAME STREET ADORESS					ge 15 Accinion
CITY-SI-ZIP MIAMI, FL 33179	☐ 0elete	CITY-ST-ZIP	<b></b> -			Chan	ge 🔲 Addition
MME .	CI Ocide	HAME				C) CORIN	de Moniton
STREET ADDRESS . City-St-7P		STREET ADDRESS CITY-ST-ZIP					1
HAVE	☐ Delete	TITLE NAME				☐ Chan	ge 🔲 Addition
STREET ADDRESS		STREET ADDRESS CITY-ST-ZIP		• . • -		* .	, -
TITLE	☐ Delete	TITLE				☐ Chan	ge 🗀 Addition
STREET ADDRESS CITY-S1-ZP		STREET ADDRESS CITY-ST-ZIP					
NTLE VANE	[] Delete	TITLE				Chan	ge Addition
STREET ADDRESS		NAME STREET ADDRESS CITY-ST-ZIP					
ITUE	☐ Delete	TITLE				☐ Chan	ge 🔲 Addition
iame Street address CTY-ST-ZIP -		NAME STREET ADDRESS CITY-ST-ZIP					ļ
<ol> <li>I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empor changed, or on an attachment with an address.</li> </ol>	wered to execute this repoi	it as required by Ch	ited in Sec have the s apter 607,	ction 119.07(3)(i) ame legal effect , Florida Statutes	Florida Statutes as if made under and that my nan	I further certify that to oath; that I am an off a appears in Block 1	ne information icer or director 0 or Block 11 if